Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF TENNESSEE	_	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

# Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's	Angela First name		First name
	license or passport).	Middle name	_	Middle name
	Bring your picture identification to your meeting with the trustee.	Burrow Last name and Suffix (Sr., Jr., II, III)	_	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	FKA Angela Whitehead Angela Morrell		
	Include your married or maiden names.	FKA Angela Storie		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9073		

Debtor 1 Angela M. Burrow

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EIN	EIN			
5.	Where you live	128 Dogtown Road Elizabethton, TN 37643	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Carter				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Debtor 1 Angela M. Burrow Case number (if known)

ar	t 2: Tell the Court About	Your B	ankruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	□с	hapter 7					
		□с	hapter 11					
		□с	hapter 12					
		<b>■</b> C	hapter 13					
3.	How you will pay the fee		about how yo	u may pay. Typi attorney is subm	cally, if you are paying the fee	neck with the clerk's office in your local cou yourself, you may pay with cash, cashier' ehalf, your attorney may pay with a credit	s check, or money	
					<b>Illments.</b> If you choose this of (Official Form 103A).	otion, sign and attach the Application for Ir	ndividuals to Pay	
			I request that but is not req applies to you	t my fee be wai uired to, waive y ur family size and	ved (You may request this opport fee, and may do so only if you are unable to pay the fee	tion only if you are filing for Chapter 7. By your income is less than 150% of the offic e in installments). If you choose this optior fficial Form 103B) and file it with your peti	cial poverty line that n, you must fill out	
).	Have you filed for bankruptcy within the	■ No	D.					
	last 8 years?	□Y€	es.					
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No	)					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No			ned an eviction judgment agai	inet vou?		
		LI YE	es. Has yo	No. Go to line 1	, ,			
					ial Statement About an Evictic	on Judgment Against You (Form 101A) and	d file it as part of	

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10

Main Document Page 4 of 52 Angela M. Burrow Case number (if known) Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, Bankruptcy Code, and are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). debtor or a debtor as defined by 11 U.S.C. § 1182(1)? I am not filing under Chapter 11. ■ No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and ☐ Yes. I do not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 5 of 52

Debtor 1 Angela M. Burrow

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Der	otor i Angela IVI. Burrow	1			mber (if known)			
Par	t 6: Answer These Quest	ions for Re	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.		<b>pusiness debts?</b> Business debts are deestment or through the operation of the				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	owe that are not consumer debts or bus	iness debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapte	r 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	☐ Yes.		Do you estimate that after any exempt provided to distribute to unsecured credit	property is excluded and administrative expense tors?			
	administrative expenses		□ No					
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	<b>1</b> -49		□ 1,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000	<b>5</b> 0,001-100,000			
		☐ 100-19 ☐ 200-99		□ 10,001-25,000	☐ More than100,000			
19.	How much do you estimate your assets to	<b>■</b> \$0 - \$9		□ \$1,000,001 - \$10 million	\$500,000,001 - \$1 billion			
	be worth?		01 - \$100,000 001 - \$500,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			001 - \$300,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you estimate your liabilities	□ \$0 - \$9	50,000 01 - \$100,000	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion			
	to be?		01 - \$100,000	□ \$50,000,001 - \$30 million	□ \$1,000,000,001 - \$10 billion			
			001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Par	t7: Sign Below							
For	you	I have ex	amined this petition, and I de	clare under penalty of perjury that the in	nformation provided is true and correct.			
				7, I am aware that I may proceed, if eligi relief available under each chapter, and	ible, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
I request relief in accordance with the chapter of title 11, United States C					specified in this petition.			
		bankrupto and 3571	stand making a false statement, concealing property, or obtaining money or property by fraud in connection with a ptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 71.					
			ela M. Burrow	Signature of De	ehtor 2			
			<b>M. Burrow</b> e of Debtor 1	Signature of De	55(0) 2			
		Executed	on <b>December 17, 2020</b>	Executed on				
			MM / DD / YYYY		MM / DD / YYYY			

Debtor 1	Angela M. Burrow	Case number (if known)	
----------	------------------	------------------------	--

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Charles Parks Pope Signature of Attorney for Debtor	Date	December 17, 2020
Charles Parks Pope 015617 Printed name		
The Pope Firm, P.C. Firm name		
404 E Watauga Ave. PO BOX 6185		
Johnson City, TN 37602		
Number, Street, City, State & ZIP Code		
Contact phone <b>423-282-2512</b>	Email address	ecf@thepopefirm.com
015617 TN		
Bar number & State		<del></del>

Certificate Number: 15317-TNE-CC-035181112



# **CERTIFICATE OF COUNSELING**

I CERTIFY that on <u>December 15, 2020</u>, at <u>11:44</u> o'clock <u>AM PST</u>, <u>Angela M Burrow</u> received from <u>Access Counseling</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the <u>Eastern District of Tennessee</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: December 15, 2020

By: /s/Lea Sorino

Name: Lea Sorino

Title: Counselor

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. 109(h) and 521(b).

Fill	in this inforr	nation to identify you	r case:			
De	btor 1	Angela M. Burro	w			
Dal	htor O	First Name	Middle Name	Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States Ba	inkruptcy Court for the:	EASTERN DISTRICT OF	TENNESSEE		
Ca	se number					
-	nown)					check if this is an mended filing
						g
∩f	ficial Fo	rm 107				
			Affairs for Individ	duals Filing for B	ankruptcy	4/19
					equally responsible for sup or additional pages, write you	
nun	nber (if know	n). Answer every ques	stion.			
Pa	rt 1: Give I	Details About Your Ma	arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	☐ Married	I				
	■ Not ma					
2.	During the I	ast 3 vears, have vou	lived anywhere other than v	where vou live now?		
	_	, <b>,</b>	,			
	■ No		ived in the leet 2 years. Do no	at include where you live now		
	Li res. Lis	st all of the places you i	ived in the last 3 years. Do no	of include where you live now		
	Debtor 1 Pi	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
2	Within the I	act 9 years, did you ov	or live with a speuse or les	ual aquivalent in a commun	ity property state or territory	12 (Community proporty
stat					co, Texas, Washington and W	
	■ No					
	■ No □ Yes. Ma	ake sure vou fill out <i>Sch</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
		•	`	,		
Pa	rt 2 Expla	in the Sources of You	r Income			
4.					ear or the two previous caler	ndar years?
			u received from all jobs and a have income that you receive			
	_	3 ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , ,		
	□ No ■ Ves Fil	I in the details.				
	■ 162. FII	i iii tile details.				
			Debtor 1	_	Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.	Gross income (before deductions
				exclusions)		and exclusions)
		of current year until	■ Wages, commissions,	\$48,561.60	☐ Wages, commissions,	
ıne	uate you file	ed for bankruptcy:	bonuses, tips		bonuses, tips	
			☐ Operating a business		Operating a business	

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 10 of 52

Debtor 1 Angela M. Burrow Case number (if known)

				Debtor 1					Debtor 2		
		Sources of Check all tha			s income re deductions and sions)	b	Sources of ind Check all that a		Gross income (before deductions and exclusions)		
		ndar year: December	31, 2019 )	■ Wages, o	commissions,		\$46,566.0		☐ Wages, con bonuses, tips	nmissions,	
				☐ Operating	g a business				☐ Operating a	business	
		ndar year be December		■ Wages, o	commissions,		\$42,019.0	0	☐ Wages, con bonuses, tips	nmissions,	
				☐ Operating	g a business				☐ Operating a	business	
	and other winnings.  List each	public bene If you are fi	fit payments; ling a joint cas the gross inco	pensions; rent se and you hav	al income; inter ve income that y	rest; divic you recei		llecte it onl	d from lawsuits; y once under D	royalties; an ebtor 1.	ecurity, unemployment, d gambling and lottery
				Debtor 1					Debtor 2		
				Sources of in Describe bel		each (befor	s income from source re deductions and sions)	d	Sources of incommendation Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	ayments You	Made Before	You Filed for I	Bankrup	tcy				
5.	Are eithed ☐ No.	Neither D individual	ebtor 1 nor D primarily for a 90 days befo Go to line 7	personal, fam personal, fam are you filed fo	ily, or househol	umer dek ld purpos id you pa	ots. Consumer dese."  y any creditor a te	otal c	of \$6,825* or mo	re?	1(8) as "incurred by an
			paid that cre not include	editor. Do not payments to a	include paymen in attorney for th	nts for do his bankr	mestic support of	bligat	ions, such as cl	nild support a	ind alimony. Also, do
	■ Yes				rimarily consur bankruptcy, di		ots. y any creditor a t	otal c	of \$600 or more	?	
		□ No.	Go to line 7								
		■ Yes	include pay		estic support ol		of \$600 or more a s, such as child s				t creditor. Do not nclude payments to an
	Creditor	's Name an	d Address	D	ates of payme	ent	Total amount paid		Amount you still owe	Was this p	payment for
	980 W	E Street	unity Credit 37643-2900		December 202	20	\$889.00	•	\$123,208.00	■ Mortgae □ Car □ Credit ( □ Loan R □ Supplie □ Other_	Card

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 11 of 52

		Main Document	Page 11 of 52	
Debtor 1	Angela M. Burrow		Case number (if known)	

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.  No Yes. List all payments to an insider.	rtners; relatives of any gen- control, or owner of 20% of	eral partners; partner r more of their votin	erships of which g securities; and	you are a general you are a general any managing a	al partner; corporations agent, including one for
	Insider's Name and Address	Dates of payment	Total amount	Amount yo		this payment
			paid	still ow	e	
8.	Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cos		ments or transfer a	any property o	n account of a d	ebt that benefited an
	No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still ow		this payment ditor's name
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.					
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>					
	Case title Case number	Nature of the case	Court or agency		Status of the case	
	Ballad Health vs. Angela Burrow CV1183-18	Civil judgement	General Sessions Court of Carter County 900 E. Elk Ave., Ste. A. Elizabethton, TN 37643		☐ Pending ☐ On appe ☐ Conclud	eal
	C&F Finance company vs. Angela Burrow CV1072-20	Civil judgement	General Sessions Court of Carter County 900 E. Elk Ave., Ste. A. Elizabethton, TN 37643		☐ Pending☐ On appe☐ Conclud	eal
10.	Within 1 year before you filed for bankruptor Check all that apply and fill in the details below □ No. Go to line 11.		erty repossessed, f	oreclosed, gar	nished, attached	d, seized, or levied?
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Da	ate	Value of the property
		Explain what happened	I			property
	C&f Finance Company 1313 E Main Street	Automobile		3/	2020	\$13,000.00
	Richmond, VA 23219	<ul> <li>■ Property was repossessed.</li> <li>□ Property was foreclosed.</li> <li>□ Property was garnished.</li> <li>□ Property was attached, seized or levied.</li> </ul>				

Casa 2:20-hk-51008-SDR Entered 12/17/20 16:38:10

De	otor 1	Angela M. Burrow		ain Document	Page 12 of 52	nber (if known)	o Desc
11.	acco	in 90 days before you filed for bankro ounts or refuse to make a payment be No Yes. Fill in the details. ditor Name and Address	ecause			Date action was	amounts from your Amount
40	1000						e. e
12.	cour	in 1 year before you filed for bankrup t-appointed receiver, a custodian, or No Yes			rty in the possession of	an assignee for the bend	ant of creditors, a
Pa	rt 5:	List Certain Gifts and Contributions	8				
13.		in 2 years before you filed for bankru No Yes. Fill in the details for each gift.	ıptcy,	did you give any gifts	s with a total value of mo	ore than \$600 per person	?
	per Pers	s with a total value of more than \$600 person son to Whom You Gave the Gift and dress:	0	Describe the gifts		Dates you gave the gifts	Value
14.		in 2 years before you filed for bankru No Yes. Fill in the details for each gift or co			s or contributions with a	total value of more than	\$600 to any charity?
	mor Cha	s or contributions to charities that to re than \$600 rrity's Name dress (Number, Street, City, State and ZIP Code)		Describe what you	contributed	Dates you contributed	Value
Pai	rt 6:	List Certain Losses					
15.	or ga	in 1 year before you filed for bankrup ambling? No Yes. Fill in the details.	otcy o	r since you filed for b	ankruptcy, did you lose	anything because of the	it, fire, other disaster
		v the loss occurred	Includ		verage for the loss rance has paid. List pendi of Schedule A/B: Property		Value of property lost
Pa	rt 7:	List Certain Payments or Transfers					
16.	cons	nin 1 year before you filed for bankrup sulted about seeking bankruptcy or p de any attorneys, bankruptcy petition pr	repari	ing a bankruptcy peti	tion?	, , ,	rty to anyone you
		No					
		Yes. Fill in the details.					
		son Who Was Paid Iress		Description and va transferred	llue of any property	Date payment or transfer was	Amount of payment

Johnson City, TN 37602

attorney fees

payment

\$500.00

made

10/16/2020

The Pope Firm

PO Box 6185

Email or website address Person Who Made the Payment, if Not You

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 13 of 52

Debtor 1 Angela M. Burrow

Case number (if known)

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and vatransferred	alue of any prop	perty	Date payment or transfer was made	Amount of payment	
	CINIegal 4540 Honeywell Ct. Dayton, OH 45424	credit report			10.15.2020	\$30.00	
17.	Within 1 year before you filed for bankruptcy, d promised to help you deal with your creditors of Do not include any payment or transfer that you lis	or to make payments			or transfer any proper	ty to anyone who	
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Description and value of any property or transferred Transferred Date pays					Amount of payment	
	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage of include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.						
	Person Who Received Transfer Address Person's relationship to you	Description and va property transferre			any property or received or debts change	Date transfer was made	
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protection No  Yes. Fill in the details.		property to a s	self-settled tru	ust or similar device o	of which you are a	
	Name of trust	Description and va	alue of the prop	erty transferr	ed	Date Transfer was made	
Par	t 8: List of Certain Financial Accounts, Instru	ıments, Safe Deposit	Boxes, and Sto	rage Units			
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instraction sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates houses, pension funds, cooperatives, associations, and other financial institution ■ No ■ Yes. Fill in the details.							
		ast 4 digits of ecount number	count number instrument c		te account was osed, sold, oved, or nsferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Str State and ZIP Code)		Describe the	contents	Do you still have it?	

Debtor 1 Angela M. Burrow

Case number (if known)

22.	2. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
	No No								
	Yes. Fill in the details.		-		_				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe	e the contents	Do you still have it?				
Par	19: Identify Property You Hold or Control for S	Someone Else							
23.	Do you hold or control any property that someone for someone.	ne else owns? Include any prope	rty you bo	rrowed from, are storing for	r, or hold in trust				
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe	e the property	Value				
Par	110: Give Details About Environmental Informa	tion							
For	he purpose of Part 10, the following definitions a	apply:							
-	Environmental law means any federal, state, or I toxic substances, wastes, or material into the air regulations controlling the cleanup of these sub	r, land, soil, surface water, groun stances, wastes, or material.	dwater, or	r other medium, including st	tatutes or				
_	Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s		law, whet	her you now own, operate,	or utilize it or used				
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		s waste, h	azardous substance, toxic	substance,				
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of whe	n they occ	curred.					
24.	Has any governmental unit notified you that you	may be liable or potentially liable	under or	in violation of an environm	ental law?				
	■ No								
	Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	_	ironmental law, if you w it	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?								
	No								
	Yes. Fill in the details.	0	F		Data af matica				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State at ZIP Code)	_	ironmental law, if you w it	Date of notice				
26.	Have you been a party in any judicial or adminis	trative proceeding under any env	ironmenta	al law? Include settlements	and orders.				
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature o	of the case	Status of the case				
Par	11: Give Details About Your Business or Conr	nections to Any Business							
27.	Within 4 years before you filed for bankruptcy, d	lid you own a business or have a	ny of the f	ollowing connections to any	y business?				
	☐ A sole proprietor or self-employed in a tr	rade, profession, or other activity	, either ful	II-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 15 of 52

A partner in a partnership   An officer, director, or managing executive of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   No. None of the above applies. Go to Part 12.     Yes. Check all that apply above and fill in the details below for each business.  Business Name Address   Name of accountant or bookkeeper   Address   Name of accountant or bookkeeper   Name of accountant or bookk	Deb	otor 1	Angela M. Burrow		Case number (if known)						
□ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Name of accountant or bookkeeper Do not include Social Security number or ITIN. Dates business existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code)  Part 122: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  18 /Angela M. Burrow Signature of Debtor 1  Date December 17, 2020 Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)? ■ No □ Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?					·						
□ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Name of accountant or bookkeeper Do not include Social Security number or ITIN. Dates business existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code)  Part 122: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  18 /Angela M. Burrow Signature of Debtor 1  Date December 17, 2020 Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)? ■ No □ Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?			A newtone in a newtoneschip								
□ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper Do not include Social Security number or ITIN. Dates business existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below.  Name Address (Number, Street, City, State and ZIP Code)  Part 122: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.    Signature of Debtor 1   Signature of Debtor 2   Signature of Debtor 3   Signature of De											
No. None of the above applies. Go to Part 12.    Yes. Check all that apply above and fill in the details below for each business.  Business Name			☐ An officer, director, or managing ex	ecutive of a corporation							
□ Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code)  Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.  ■ No □ Yes. Fill in the details below.  Name Address (Number, Street, City, State and ZIP Code)  Date Issued  Date Issued  Date Issued  Date Issued  Address (Number, Street, City, State and ZIP Code)  Fart 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  S/Angela M. Burrow Signature of Debtor 1  Date December 17, 2020 Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No □ Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?			☐ An owner of at least 5% of the voting or equity securities of a corporation								
Business Name Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Business Name Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Business Rame Address (Number, Street, City, State and ZIP Code)  No  No  No  No  Name Address (Number, Street, City, State and ZIP Code)  Date Issued  Address (Number, Street, City, State and ZIP Code)  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  Is U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Angela M. Burrow Angela M. Burrow Signature of Debtor 1  Date December 17, 2020 Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)?  No			No. None of the above applies. Go to F	Part 12.							
Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Name of accountant or bookkeeper  Do not include Social Security number or ITIN. Dates business existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.  No No Same Address (Number, Street, City, State and ZIP Code)  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. \$\$\frac{8}{3}\$ \$\frac{15}{15}\$, and \$3571.  S/Angela M. Burrow  Angela M. Burrow  Signature of Debtor 1  Date December 17, 2020 Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?			Yes. Check all that apply above and fill	in the details below for each business							
Name of accountant or bookkeeper  Dates business existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.  No Yes. Fill in the details below.  Name Address (Number, Street, City, State and ZIP Code)  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Angela M. Burrow Angela M. Burrow Angela M. Burrow Signature of Debtor 1  Date December 17, 2020 Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?				Describe the nature of the business							
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.  No Yes. Fill in the details below.  Name Address (Number, Street, City, State and ZIP Code)  Date Issued  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Angela M. Burrow Angela M. Burrow Signature of Debtor 1  Date December 17, 2020 Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?				Name of accountant or bookkeeper	Do not include Social Security number or ITIN.						
Institutions, creditors, or other parties.  No Yes. Fill in the details below.  Name Address (Number, Street, City, State and ZIP Code)  Date Issued  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §8 152, 1341, 1519, and 3571.  /s/ Angela M. Burrow Angela M. Burrow Signature of Debtor 1  Date December 17, 2020 Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?					Dates business existed						
No Yes. Fill in the details below.  Name Address (Number, Street, City, State and ZIP Code)  Date Issued  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Angela M. Burrow Angela M. Burrow Signature of Debtor 1  Date December 17, 2020  Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?				cy, did you give a financial statement t	o anyone about your business? Include all financial						
Yes. Fill in the details below.   Name		instit	tutions, creditors, or other parties.								
Name Address (Number, Street, City, State and ZIP Code)  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Angela M. Burrow Angela M. Burrow Signature of Debtor 1  Date December 17, 2020 Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?			No								
Address (Number, Street, City, State and ZIP Code)  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Angela M. Burrow Angela M. Burrow Signature of Debtor 1  Date December 17, 2020  Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?			Yes. Fill in the details below.								
Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Angela M. Burrow  Angela M. Burrow  Signature of Debtor 2  Signature of Debtor 1  Date  December 17, 2020  Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No  Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?				Date Issued							
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Angela M. Burrow Angela M. Burrow Signature of Debtor 1  Date December 17, 2020  Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No  Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?											
are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Angela M. Burrow  Angela M. Burrow  Signature of Debtor 1  Date	Par	t 12:	Sign Below								
are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Angela M. Burrow  Angela M. Burrow  Signature of Debtor 1  Date	Lho	10 F00	nd the engineers on this Statement of Ein	annoial Affaire and any attachments on	d I dealars under panelty of parity that the analysis						
18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Angela M. Burrow Angela M. Burrow Signature of Debtor 2  Date December 17, 2020  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No □ Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	are t	rue a	nd correct. I understand that making a	false statement, concealing property, of	or obtaining money or property by fraud in connection						
/s/ Angela M. Burrow Angela M. Burrow Signature of Debtor 2  Date December 17, 2020 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?				\$250,000, or imprisonment for up to 20	years, or both.						
Angela M. Burrow Signature of Debtor 2  Date December 17, 2020 Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?											
Signature of Debtor 1  Date December 17, 2020  Date  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No  Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?				Signature of Debtor 2							
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?				olgilatare er Dester 2							
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	Dat	e D	December 17, 2020	Date							
■ No □ Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?			·	<u> </u>							
☐ Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?		•	ttach additional pages to Your Stateme	ent of Financial Affairs for Individuals F	iling for Bankruptcy (Official Form 107)?						
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?											
_ ^											
■ NO			eay or agree to pay someone who is not	an attorney to help you fill out bankru	otcy forms?						
☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	_	-	ame of Person . Attach the <i>Bankru</i>	ptcv Petition Preparer's Notice. Declaration	n. and Signature (Official Form 119).						

### Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 16 of 52

		= 0 0 0	mont : dig = = 0	
Fill in this inform	mation to identify your	case:		
Debtor 1	Angela M. Burrov	v		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT C	F TENNESSEE	
Case number				
(if known)				

# Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t1: Summarize Your Assets		
		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	43,550.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	5,150.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	48,700.00
⊃ar	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	123,208.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	29,218.80
	Your total liabilities	\$	152,426.80
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,733.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,142.00
⊃ar	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
	■ Yes		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

### Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 17 of 52

Debtor 1 Angela M. Burrow Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

\$ 4,294.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

### Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 18 of 52

		M	ain L	ocument	Page 18 of 52	<u> </u>		
Fill in this inf	ormation to identi	fy your case and th	nis filing	g:				
Debtor 1	Angela M.	Burrow						
Debior 1	First Name		e Name		Last Name			
Debtor 2								
(Spouse, if filing)	First Name	Middle	e Name		Last Name			
United States	Bankruptcy Court f	or the: EASTERN	DISTR	CT OF TENNE	ESSEE			
Case number					_			
								amended filing
Official F	orm 106A/	R						
_								
Scheal	<u> </u>	roperty						12/15
think it fits best information. If n Answer every q	. Be as complete an nore space is needed uestion.	d accurate as possibl d, attach a separate s	le. If two heet to t	married people his form. On the	in asset fits in more than one are filing together, both are top of any additional page	e equally responsib	le for supply	ying correct
Part 1: Descri	ibe Each Residence,	Building, Land, or Ot	ner Real	Estate You Ow	n or Have an Interest In			
1. Do you own	or have any legal or	equitable interest in a	any resid	lence, building,	land, or similar property?			
☐ No. Go to	Dort 0							
_								
■ Yes. Whe	re is the property?							
1.1			What	is the property	? Check all that apply			
128 Do	gtown Road		☐ Single-family home			Do not deduct secured claims or exemptions. Put		
Street addre	ess, if available, or other of	lescription		Duplex or multi-	ti-unit building	the amount of any secured cl Creditors Who Have Claims		
			_	Condominium	or cooperative	Creditors who ha	ave Claims 3	весигей бу Рторенту.
			Ц		or mobile home	Current value of	the C	urrent value of the
Elizabe		37643-0000				entire property?	•	ortion you own?
City	State	ZIP Code		Investment pro	operty	\$87,10	0.00	\$43,550.00
				Timeshare Other				ownership interest
					in the preparty? Obselves	(such as fee sim a life estate), if k		y by the entireties, or
			Who		in the property? Check one	Joint tenant		
Carter								
County					Ophtor 2 only			
•			_		the debtors and another			nity property
			Othe		ou wish to add about this ite	(see instruction	is)	
				erty identification		oni, suon as local		
				cel Tax ID 04				
					ant with son, Kaleb V	Vhitehead		
					rom Part 1, including an			\$43,550.00
pages yo	u have attached to	or Part 1. Write that	numbe	r here		=>		Ψ+3,000.00
Part 2: Descri	ibe Your Vehicles							
Do you own, I	ease, or have lega	I or equitable inter	est in a	ny vehicles, v	vhether they are register	red or not? Include	e any vehic	eles you own that
					xecutory Contracts and Ur		•	
3. Cars vans	. trucks, tractors	sport utility vehicle	s. moto	rcycles				
Jai 5, Fail 5	,,		٥,٠١					
■ No								
☐ Yes								

Official Form 106A/B Schedule A/B: Property page 1

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Main Document Page 19 of 52 Case number (if known) Angela M. Burrow 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... \$2,500,00 furniture, decor, linens, other household goods 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... TVs, cell phone, appliances, other electronics \$1,000.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

■ No

Debtor 1

■ No

☐ Yes. Describe.....

9. Equipment for sports and hobbies

☐ No

Yes. Describe.....

excercise bike

\$50.00

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

☐ Yes. Describe.....

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

□ No

Yes. Describe.....

every day apparel and shoes

\$1,500.00

Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

☐ Yes. Describe.....

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 20 of 52

Debtor 1 Angela M. Burrow Case number (if known)

13.	Non-farm animals	
	Examples: Dogs, cats, birds, horses	
	■ No	
	☐ Yes. Describe	
14.	Any other personal and household items you did not already list, including any health aids you did not list	
	Yes. Give specific information	
	Tes. Give specific information	
15	5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$5,050.00
D	Describe Very Financial Aceste	
	o you own or have any legal or equitable interest in any of the following?	Current value of the
D	byou own or have any legal or equitable interest in any or the following:	portion you own? Do not deduct secured claims or exemptions.
16	Cash	
	Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petit $\square$ No	ion
	■ Yes	
	Cash on hand	\$100.00
	Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage institutions. If you have multiple accounts with the same institution, list each.  □ No	nouses, and other similar
	■ Yes	
	17.1. Checking FSNB	\$0.00
18.	Bonds, mutual funds, or publicly traded stocks  Examples: Bond funds, investment accounts with brokerage firms, money market accounts	
	■ No	
	Yes Institution or issuer name:	
	Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest joint venture	st in an LLC, partnership, and
	■ No	
	☐ Yes. Give specific information about them	
	Name of entity: % of ownership:	
20.	Government and corporate bonds and other negotiable and non-negotiable instruments  Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.  Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.	
	■ No	
	☐ Yes. Give specific information about them	
	Issuer name:	
21.	Retirement or pension accounts  Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing	plans
	■ No	
	Yes. List each account separately.  Type of account: Institution name:	

Official Form 106A/B Schedule A/B: Property page 3

D	ebtor 1	Angela M.	. Burrow			Case number (if known)	)
22.	Your sh Example No	nare of all unu les: Agreeme		epaid rent, public utilit	ies (electric, gas, wa	e or use from a company ater), telecommunications compa	unies, or others
	☐ Yes			Ins	itution name or indi	vidual:	
23.	Annuitie	es (A contrac	t for a periodic paym	ent of money to you, e	either for life or for a	number of years)	
	☐ Yes		Issuer name and de	escription.			
24.			ation IRA, in an acc		BLE program, or u	nder a qualified state tuition pr	ogram.
	☐ Yes		Institution name and	d description. Separate	ely file the records o	f any interests.11 U.S.C. § 521(c	):
25.	Trusts, ■ No	equitable or	future interests in	property (other than	anything listed in l	ine 1), and rights or powers ex	ercisable for your benefit
	☐ Yes.	Give specific	information about th	em			
26	Example ■ No	les: Internet o		secrets, and other in ites, proceeds from ro em			
27.	Example ■ No	les: Building p	s, and other general permits, exclusive lick information about the	enses, cooperative as	sociation holdings, I	iquor licenses, professional licen	ses
		•		<del>5</del> 111			
M	oney or p	oroperty owe	ed to you?				Current value of the portion you own?  Do not deduct secured claims or exemptions.
28.	■ No	unds owed to	•	em, including whether	you already filed the	returns and the tax years	
29.	■ No	les: Past due	or lump sum alimon	/, spousal support, chi	ld support, mainten	ance, divorce settlement, propert	y settlement
30	Example ■ No	<i>les:</i> Unpaid w	unpaid loans you ma	ance payments, disab ade to someone else	ility benefits, sick pa	ay, vacation pay, workers' compo	ensation, Social Security
31.		ts in insuran les: Health, d		ince; health savings a	ccount (HSA); credit	, homeowner's, or renter's insura	ance
	■ No						
	☐ Yes. N	Name the insu	urance company of e Company na	ach policy and list its a	/alue.	Beneficiary:	Surrender or refund value:
32.	If you a someon	re the benefic ne has died.	ciary of a living trust,	from someone who expect proceeds from		icy, or are currently entitled to re	ceive property because
		Give specific	information				

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 22 of 52

Deb	tor 1	Angela M	. Burrow			Case number (if known)	
	Examp		d parties, whether or not y s, employment disputes, ins			and for payment	
	No Yes.	Describe eac	ch claim				
34. <b>(</b>	Other o	contingent ar	nd unliquidated claims of	every nature, includ	ling counterclaims	of the debtor and rights to se	et off claims
	No	D	de alaba				
		Describe eac					
	Any fin I <sub>No</sub>	ancial assets	s you did not already list				
		Give specific	information				
36.			ue of all of your entries from				\$100.00
Part	5: Des	scribe Any Bus	siness-Related Property You	Own or Have an Intere	st In. List any real esta	ate in Part 1.	
			ny legal or equitable interest i	n any business-related	d property?		
	No. Go	to Part 6.					
	Yes. G	So to line 38.					
Part	If yo	ou own or have	m- and Commercial Fishing- an interest in farmland, list it in	Part 1.			
			e any legal or equitable in	terest in any farm- o	or commercial fishin	ng-related property?	
	_	Go to Part 7.					
	☐ Yes.	. Go to line 47.					
Part	7:	Describe All	Property You Own or Have a	n Interest in That You I	Did Not List Above		
	Examp		property of any kind you dickets, country club member				
	■ No □ Yes.	Give specific	information				
54.	Add t	he dollar val	ue of all of your entries fr	om Part 7. Write that	t number here		\$0.00
Part	8:	List the Totals	s of Each Part of this Form				
55.	Part 1	l: Total real e	estate, line 2				\$43,550.00
56.	Part 2	2: Total vehic	eles, line 5		\$0.00		
57.	Part 3	3: Total perso	onal and household items	, line 15	\$5,050.00		
58.	Part 4	l: Total finan	cial assets, line 36	_	\$100.00		
59.			ness-related property, line	_	\$0.00		
60.			and fishing-related property	_	\$0.00		
61.	Part 7	7: Total other	property not listed, line 5	<b>54</b> + _	\$0.00		
62.	Total	personal pro	pperty. Add lines 56 through	n 61	\$5,150.00	Copy personal property tota	\$5,150.00
63.	Total	of all proper	ty on Schedule A/B. Add I	ine 55 + line 62			\$48,700.00

Official Form 106A/B Schedule A/B: Property page 5

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Des Main Document Page 23 of 52

nation to identify your	case:			
Angela M. Burrov	v			
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
nkruptcy Court for the:	EASTERN DISTRICT C	F TENNESSEE		
				Check if this is an amended filing
	Angela M. Burrov First Name	First Name Middle Name	Angela M. Burrow       First Name     Middle Name     Last Name       First Name     Middle Name     Last Name	Angela M. Burrow       First Name     Middle Name     Last Name       First Name     Middle Name     Last Name

# Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming?	Check one only, eve	en if your spouse is filing with you
----	-------------------------------------------	---------------------	--------------------------------------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
128 Dogtown Road Elizabethton, TN 37643 Carter County	\$43,550.00		\$5,000.00	Tenn. Code Ann. § 26-2-301
Parcel Tax ID 043 016.00 Owned joint tenant with son, Kaleb Whitehead			100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 1.1				
furniture, decor, linens, other household goods	\$2,500.00		\$2,500.00	Tenn. Code Ann. § 26-2-103
Line from Schedule A/B: <b>6.1</b>			100% of fair market value, up to any applicable statutory limit	
TVs, cell phone, appliances, other electronics	\$1,000.00		\$1,000.00	Tenn. Code Ann. § 26-2-103
Line from Schedule A/B: <b>7.1</b>			100% of fair market value, up to any applicable statutory limit	
excercise bike Line from Schedule A/B: 9.1	\$50.00		\$50.00	Tenn. Code Ann. § 26-2-103
2.10 110111 0011000010 772. <b>071</b>			100% of fair market value, up to any applicable statutory limit	
every day apparel and shoes Line from Schedule A/B: 11.1	\$1,500.00		\$1,500.00	Tenn. Code Ann. § 26-2-104
Line Iron Soliedule PVD. 11.1			100% of fair market value, up to any applicable statutory limit	

# Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 24 of 52

Debtor	1 Angela M. Burrow			Case number (if known)	
	ief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	ash on hand ne from Schedule A/B: <b>16.1</b>	\$100.00		\$100.00	Tenn. Code Ann. § 26-2-103
LII	ne nom <i>Schedule AVB</i> . 10.1			100% of fair market value, up to any applicable statutory limit	
	hecking: FSNB ne from Schedule A/B: 17.1	\$0.00		\$0.00	Tenn. Code Ann. § 26-2-103
LII	ile IIIIII Schedule AVD. 17.1			100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption bubject to adjustment on 4/01/22 and every No  Yes. Did you acquire the property cover No  Yes	3 years after that for ca	ses fi	•	,

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc

		Main Document Pa	age 2	25 of 52	.,_0 _0.000	2000
Fill	in this information to identify					
Deb	tor 1 Angela M. B	urrow				
	First Name		ne			
		Middle Name Last Na	no			
Unit	ed States Bankruptcy Court for	the: EASTERN DISTRICT OF TENNESSEE	:			
Cas	e number					
(if kn	own)				_	
					amend	ied illing
Off	icial Form 106D					
Sc	hedule D: Credito	ors Who Have Claims Secu	red	by Propert	V	12/15
s ne numb	eded, copy the Additional Page, for (if known).  any creditors have claims secure—	ed by your property?	rm. On	the top of any addition	nal pages, write your na	
	Yes. Fill in all of the informa	ion below.				
Pari	List All Secured Claims					
			rately	Column A	Column B	Column C
for e	ach claim. If more than one credito	r has a particular claim, list the other creditors in Part 2		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Northeast Community	Describe the property that secures the claim		\$123,208.00	\$87,100.00	\$36,108.00
	Creditor's Name	128 Dogtown Road Elizabethton, T 37643 Carter County Parcel Tax ID 043 016.00 Owned joint tenant with son, Kalek	N			
			nat			
	37643-2900	apply.				
	Number, Street, City, State & Zip Code	Unliquidated				
		☐ Disputed				
_		Nature of lien. Check all that apply.				
_	=		or secu	red		
Desici 2 dilly						
_	· ·		en)			
	Check if this claim relates to a	101	oal Re	esidence		
Date	e debt was incurred	Last 4 digits of account number 0	820			
	bibor 1					
Ad	Inited States Bankruptcy Court for the:EASTERN DISTRICT OF TENNESSEE					
	•					

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

\$123,208.00

Write that number here:

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 26 of 52

		Main Document	Page 26 of 52	
Fill in this ir	nformation to identify your	case:		
Debtor 1	Angela M. Burrov	•		
DODIOI 1	First Name		Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United State	s Bankruptcy Court for the:	EASTERN DISTRICT OF TENNE	ESSEE	
Case numbe	ar.			
(if known)				☐ Check if this is an
				amended filing
				-
	orm 106E/F	_		
Schedul	e E/F: Creditors W	ho Have Unsecured C	Claims	12/15
Schedule G: E Schedule D: C eft. Attach the name and case	xecutory Contracts and Unexp reditors Who Have Claims Sec Continuation Page to this page e number (if known).	oired Leases (Official Form 106G). Do cured by Property. If more space is ne- ge. If you have no information to repo	executory contracts on Schedule A/B: not include any creditors with partially seded, copy the Part you need, fill it out, rt in a Part, do not file that Part. On the t	secured claims that are listed in number the entries in the boxes on the
	st All of Your PRIORITY Un			
•	reditors have priority unsecure	d claims against you?		
	o to Part 2.			
☐ Yes.				
Part 2:	ist All of Your NONPRIORIT	Y Unsecured Claims		
	reditors have nonpriority unsec			
			un ath an arb adular	
	ou nave nothing to report in this p	eart. Submit this form to the court with yo	ur other schedules.	
Yes.				
unsecured	d claim, list the creditor separately	y for each claim. For each claim listed, ic	creditor who holds each claim. If a credit dentify what type of claim it is. Do not list cl we more than three nonpriority unsecured of	laims already included in Part 1. If more
				Total claim
4.1 <b>Adv</b>	ance Financial	Last 4 digits of accou	int number	\$2,000.00
	priority Creditor's Name			
	W Elk Ave abethton, TN 37643	When was the debt in	curred?	
	ber Street City State Zip Code	As of the date you file	e, the claim is: Check all that apply	
Who	incurred the debt? Check one.			
<b>■</b> D	ebtor 1 only	☐ Contingent		
□р	ebtor 2 only	☐ Unliquidated		
□p	ebtor 1 and Debtor 2 only	☐ Disputed		
	t least one of the debtors and and	_ '	Y unsecured claim:	
	theck if this claim is for a com			
debt		☐ Obligations arising of	out of a separation agreement or divorce the	nat you did not
	e claim subject to offset?	report as priority claims		
■ N		·	r profit-sharing plans, and other similar deb	-TS
ΠY	es	Other. Specify		

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 27 of 52

Angela M Burrow

Case 1:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 27 of 52

Case number (if known)

Debioi	Angela W. Burrow		Case Humber (II known)	
4.2	Ars Account Resolution	Last 4 digits of account number	0592	\$123.00
	Nonpriority Creditor's Name  1643 Nw 136th Ave Sunrise, FL 33323	When was the debt incurred?	Opened 02/18 Last Active 12/16	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	and a second and a second and second and second	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney Se Phys Svc	
4.3	C&f Finance Company	Last 4 digits of account number	7220	\$15,216.00
	Nonpriority Creditor's Name  1313 E Main Street Richmond, VA 23219	When was the debt incurred?	Opened 09/19 Last Active 6/29/20	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	tration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile	е геро	
4.4	Enhanced Recovery Co L	Last 4 digits of account number	6362	\$375.00
	Nonpriority Creditor's Name Po Box 57547	When was the debt incurred?	Opened 08/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Collection Other. Specify Communic	Attorney Charter ations	

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 28 of 52

Deb	tor 1 Angela M. Burrow		Case number (if known)	
4.5	Enhanced Recovery Co L	Last 4 digits of account number	0562	\$179.00
	Nonpriority Creditor's Name Po Box 57547	When was the debt incurred?	Opened 11/18	
	Jacksonville, FL 32241  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	O continuent		
	Debtor 2 only	☐ Contingent		
	_ ′	☐ Unliquidated☐ Disputed		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
		☐ Student loans	- O.d	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Collection		
4.6	Inpt Consit Of	Last 4 digits of account number	7576	\$37.00
	Nonpriority Creditor's Name  1643 Nw 136th Ave Sunrise, FL 33323	When was the debt incurred?	Opened 04/17 Last Active 09/15	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	•		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. SpecifyMedical De	<u>bt</u>	
4.7	Law Offices Mba	Last 4 digits of account number	4646	\$347.00
	Nonpriority Creditor's Name 3400 Texoma Parkway Sherman, TX 75092	When was the debt incurred?	Opened 05/20	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Collection of the Collection o	Attorney Tri-Cities Regional	

Debto	or 1 Angela M. Burrow		Case number (if known)	
4.8	Tri Cities	Last 4 digits of account number	0006	\$1,183.00
	Nonpriority Creditor's Name  Pob 715  Elizabethton, TN 37644	When was the debt incurred?	Opened 12/11/19 Last Active 09/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Note Loan		
4.9	Tri Cities	Last 4 digits of account number	0004	Unknown
	Nonpriority Creditor's Name  Pob 715  Elizabethton, TN 37644	When was the debt incurred?	Opened 11/17 Last Active 11/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Note Loan		
4.1 0	Wakefield & Associates	Last 4 digits of account number	8318	\$3,864.80
	Nonpriority Creditor's Name  Po Box 50250  Knoxville, TN 37950	When was the debt incurred?	Opened 06/19 Last Active 12/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Collection Civil judge	Attorney Ballad Health ment	

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 30 of 52

Wakefield & Associates	Last 4 digits of account number	9036	\$1,99
Nonpriority Creditor's Name Po Box 50250	When was the debt incurred?	Opened 06/17	
Knoxville, TN 37950  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Collection	Attorney Ballad Health	
Wakefield & Associates	Last 4 digits of account number	7719	\$9
Nonpriority Creditor's Name <b>Po Box 50250</b>	When was the debt incurred?	Opened 02/46	
Knoxville, TN 37950	when was the dept incurred?	Opened 02/16	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Collection	Attorney Ballad Health	
Wakefield & Associates	Last 4 digits of account number	1077	\$50
Nonpriority Creditor's Name			70
Po Box 50250	When was the debt incurred?	Opened 02/16	
Knoxville, TN 37950  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	no or the date you me, the claim	o. Chook an mat apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharin		
□ Yes	Collection :  Other. Specify Emergency	Attorney Appalachian	

Angela W. Burrow		Case number (if known)				
Wakefield & Associates	Last 4 digits of account number	8438	\$265.00			
Nonpriority Creditor's Name  Po Box 50250  Knoxville, TN 37950	When was the debt incurred?	Opened 01/19 Last Active 08/18				
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	□ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
Yes	■ Other. Specify Collection	Attorney Ballad Health				
Wakefield & Associates	Last 4 digits of account number	2017	\$194.00			
Nonpriority Creditor's Name	_	One and OC/40 I and Andrica				
Po Box 50250 Knoxville, TN 37950	When was the debt incurred?	Opened 06/19 Last Active 01/19				
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
Yes	■ Other. Specify Collection	Attorney Ballad Health				
Wakefield & Associates	Last 4 digits of account number	1914	\$194.00			
Nonpriority Creditor's Name	_					
Po Box 50250 Knoxville, TN 37950	When was the debt incurred?	Opened 06/19 Last Active 01/19				
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
Who incurred the debt? Check one.						
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
$\square$ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims					
No	Debts to pension or profit-sharing					
☐ Yes	Other. Specify Collection	Attorney Ballad Health				

Debt	or 1 Angela III. Burrow		Case number (if known)			
4.1 7	Wakefield & Associates	Last 4 digits of account number	1950	\$173.00		
	Nonpriority Creditor's Name  Po Box 50250  Knoxville, TN 37950	When was the debt incurred?	Opened 06/19 Last Active 12/18			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify Collection	Attorney Ballad Health			
4.1 8	Wakefield & Associates	Last 4 digits of account number	7331	\$161.00		
	Nonpriority Creditor's Name		Opened 12/18 Last Active			
	Po Box 50250 Knoxville, TN 37950	When was the debt incurred?	08/18			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Collection				
4.1 9	Wakefield & Associates	Last 4 digits of account number	7626	\$154.00		
	Nonpriority Creditor's Name		Opened 05/19 Last Active			
	Po Box 50250 Knoxville, TN 37950	When was the debt incurred?	01/19			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	Student loans				
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	■ Other. Specify Collection	Attorney Ballad Health			
		- Other opening				

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 33 of 52

Angela M. Burrow Case number (if known)

1 Angela M. Burrow		Case number (if known)				
Wakefield & Associates	Last 4 digits of account number	1729	\$147			
Nonpriority Creditor's Name	_					
Po Box 50250 Knoxville, TN 37950	When was the debt incurred?	Opened 04/19 Last Active 12/18				
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply				
■ Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts				
Yes	■ Other. Specify Collection	Attorney Ballad Health				
Wakefield & Associates	Last 4 digits of account number	3756	\$14			
Nonpriority Creditor's Name Po Box 50250 Knowillo, TN 27050	When was the debt incurred?	Opened 11/16				
Knoxville, TN 37950  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •					
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts  ☐ Other. Specify Collection Attorney Ballad Health					
Yes						
Wakefield & Associates	Last 4 digits of account number	4748	\$14			
Nonpriority Creditor's Name		Opened 09/19 Last Active				
Po Box 50250	When was the debt incurred?	04/19				
Knoxville, TN 37950  Number Street City State Zip Code	As of the date you file, the claim	in Charle all that apply				
Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан тас арру				
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	Obligations arising out of a separation agreement or divorce that you did not port as priority claims				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts  ☐ Other. Specify  Collection Attorney Ballad Health					
□Yes						

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 34 of 52

Debi	or 1 Angela M. Burrow		Case number (if known)			
4.2 3	Wakefield & Associates	Last 4 digits of account number	1872	\$131.00		
	Nonpriority Creditor's Name Po Box 50250	When was the debt incurred?	Opened 10/15			
	Knoxville, TN 37950  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Collection	Attorney Ballad Health			
4.2 4	Wakefield & Associates	Last 4 digits of account number	5259	\$121.00		
	Nonpriority Creditor's Name Po Box 50250 Knoxville, TN 37950	When was the debt incurred?	Opened 04/17			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Collection Emergency				
4.2 5	Wakefield & Associates	Last 4 digits of account number	7868	\$119.00		
	Nonpriority Creditor's Name  Po Box 50250  Knoxville, TN 37950	When was the debt incurred?	Opened 05/19 Last Active 12/18			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated ☐ Disputed				
	☐ Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	<u> </u>			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other Specify Collection	Attornev Ballad Health			

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 35 of 52

Deb	or 1 Angela M. Burrow		Case number (if known)				
4.2 6	Wakefield & Associates	Last 4 digits of account number	4482	\$118.00			
	Nonpriority Creditor's Name  Po Box 50250	When was the debt incurred?	Opened 01/17				
	Knoxville, TN 37950  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	Пол					
	Debtor 1 only  Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim:					
	<u> </u>						
	Debtor 1 and Debtor 2 only						
	At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a sepa					
	No	Debts to pension or profit-sharin	a plane, and other cimilar debts				
		· · ·	•				
	Yes	Other. Specify Collection	Attorney Ballad Health				
4.2 7	Wakefield & Associates	Last 4 digits of account number	8735	\$107.00			
	Nonpriority Creditor's Name		Opened 06/19 Last Active				
	Po Box 50250 Knoxville, TN 37950	When was the debt incurred?	Opened 06/18 Last Active 02/18				
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:					
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another						
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts				
	■ No	Debts to pension or profit-sharin					
	Yes	■ Other. Specify Collection					
4.2 3	Wakefield & Associates	Last 4 digits of account number	7806	\$100.00			
	Nonpriority Creditor's Name	_					
	Po Box 50250 Knoxville, TN 37950	When was the debt incurred?	Opened 07/18 Last Active 03/18				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul>					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other. Specify Collection Attorney Ballad Health					
		- · · · - · · · · · · · · · · · · · · ·	<u> </u>				

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 36 of 52

Angela M. Burrow Case number (if known)

Debioi i	Arigeia W. Burrow		Case III	illipei (ii kii				
4.2 9	Wakefield & Associates	Last 4 digits of account number	7745			\$94.00		
	Nonpriority Creditor's Name  Po Box 50250	When was the debt incurred?	Oper	ned 02/16	 6			
	Knoxville, TN 37950		_					
	Number Street City State Zip Code	As of the date you file, the claim	is: Check	all that app	oly			
-	Who incurred the debt? Check one.	_						
_	Debtor 1 only	Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
l	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	Student loans						
	debt s the claim subject to offset?	Obligations arising out of a separe report as priority claims	Obligations arising out of a separation agreement or divorce that you did not					
	No	Debts to pension or profit-sharing	ng plans,	and other si	imilar debts			
I	☐ Yes	■ Other. Specify <b>Collection</b>	Attorn	ey Ballad	d Health			
U	Wakefield & Associates	Last 4 digits of account number	1673			\$67.00		
ı	Nonpriority Creditor's Name Po Box 50250 Knowyillo, TN 27050	When was the debt incurred?	Oper	ned 07/15	5			
	Knoxville, TN 37950  Number Street City State Zip Code	As of the date you file, the claim	is: Check	all that and	olv			
	Who incurred the debt? Check one.	7.6 67 11.0 44.10 704 11.0, 11.10 614.11.1		· an inai app	,			
İ	Debtor 1 only	☐ Contingent						
ı	Debtor 2 only	☐ Unliquidated						
ı	Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another		Type of NONPRIORITY unsecured claim:						
ı	☐ Check if this claim is for a community	☐ Student loans						
(	debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration ag	reement or	divorce that you did not			
I	No	☐ Debts to pension or profit-sharing	ng plans,	and other si	imilar debts			
ı	□Yes	■ Other. Specify Collection	Other Specify Collection Attorney Ballad Health					
Part 3:	List Others to Be Notified About a Deb	t That You Already Listed						
is trying have m	s page only if you have others to be notified alt g to collect from you for a debt you owe to sor ore than one creditor for any of the debts that I for any debts in Parts 1 or 2, do not fill out or	neone else, list the original creditor in you listed in Parts 1 or 2, list the add	Parts 1	or 2, then I	ist the collection agency her	re. Similarly, if you		
Name and	d Address C	י - On which entry in Part 1 or Part 2 did you	list the o	riginal credi	itor?			
		ine <u>4.3</u> of ( <i>Check one</i> ):	] Part 1: (	Creditors wi	ith Priority Unsecured Claims			
	( 17235		Part 2:	Creditors wi	ith Nonpriority Unsecured Clair	ms		
меттр	nis, TN 38187 L	ast 4 digits of account number						
Name and		on which entry in Part 1 or Part 2 did you	_	•				
Wakefield and Associates Line PO Box 51272			_		ith Priority Unsecured Claims			
	IIIe, TN 37950	•	Part 2:	Creditors wi	ith Nonpriority Unsecured Clair	ms		
		ast 4 digits of account number						
Part 4:	Add the Amounts for Each Type of Uns	secured Claim						
	ne amounts of certain types of unsecured clair unsecured claim.	ns. This information is for statistical i	eporting	purposes	only. 28 U.S.C. §159. Add the	e amounts for each		
					Total Claim			
Total	6a. Domestic support obligations		6a.	\$	0.00			
claims								
from Part		-	6b.	\$	0.00			
	6c. Claims for death or personal in	ijury while you were intoxicated	6c.	\$	0.00			

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 37 of 52

Angela M. Burrow Case number (if known)

Debtor 1 A	ngela M	Burrow .	Case no	umber (if knov	wn)
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	\$	Total Claim
otal aims om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	29,218.80
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	29,218.80

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 38 of 52

Fill in this infor	mation to identify your	case:		
Debtor 1	Angela M. Burrov	N		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F TENNESSEE	
Case number				
(if known)				

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Verizon Wireless
P.O. Box 4830
Trenton, NJ 08650

State what the contract or lease is for
Cell phone

Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 39 of 52

		Main Docum	nent Page 39	01 52	
Fill in this info	rmation to identify your	case:			
Debtor 1	Angela M. Burrov	<i>y</i>			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	sankruptcy Court for the:	EASTERN DISTRICT OF	FTENNESSEE		
Case number (if known)					☐ Check if this is an amended filing
	orm 106H • H: Your Cod	ebtors			12/15
people are filin ill it out, and n rour name and	g together, both are equi umber the entries in the case number (if known)	ally responsible for suppl	lying correct information the Additional Page to	on. If more space is need this page. On the top o	e as possible. If two married eded, copy the Additional Page, of any Additional Pages, write
□ No					
■ Yes					
2. Within t		lived in a community pro Nevada, New Mexico, Pue			states and territories include
■ No. Go t	o line 3				
		ise, or legal equivalent live	with you at the time?		
in line 2 ag	gain as a codebtor only it o), Schedule E/F (Official	f that person is a guarant	or or cosigner. Make su	ure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	mn 1: Your codebtor Number, Street, City, State and ZI	P Code		Column 2: The credi	itor to whom you owe the debt that apply:
128	eb Whitehead Dogtown Road abethton, TN 37643			■ Schedule D, line □ Schedule E/F, li □ Schedule G Northeast Commi	e <u>2.1</u> ne unity Credit Union

E:II	in this information to identify your a	222				I				
	in this information to identify your cotor 1  Angela M. E									
	otor 2				_					
Uni	ted States Bankruptcy Court for the	EASTERN DISTRICT	OF TENNESSEE							
(If kr	se number nown)		-			□ Ar		d filing		etition chapter date:
	fficial Form 106l					M	M / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/1
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not filing wi	ng jointly, and your sp ith you, do not include	ouse i infori	s liv natio	ing with you	you, inclu your spo	ude informa ouse. If mor	ation a re spac	about your ce is needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fili	ng spo	ouse
	If you have more than one job,	Employment status	■ Employed				☐ Emplo	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not e	mployed		
	employers.	Occupation	Dietary Manager							
	Include part-time, seasonal, or self-employed work.	Employer's name	Ocoee Hillview He	ealth	Cen	ter				
	Occupation may include student or homemaker, if it applies.	Employer's address	1666 Hillview Driv Elizabethton, TN		}					
		How long employed t	here? 3.5 years	;						
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to rep	ort for	any l	line, write	\$0 in the	space. Inclu	ude yo	ur non-filing
	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information f	for all e	emplo	oyers for t	hat perso	n on the line	es belo	w. If you need
						For Deb	tor 1	For Debt		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	4,	414.00	\$		N/A
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$		N/A

4,414.00

N/A

Calculate gross Income. Add line 2 + line 3.

Debt	or 1	Angela M. Burrow	_	Case r	number ( <i>if known</i> )	-			
				For	Debtor 1		Debtor 2 or filing spouse		
	Cop	by line 4 here	4.	\$	4,414.00	\$	N/A		
5.	l ist	all payroll deductions:							
٠.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	826.00	\$	N/A		
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	· :	N/A		
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	· :	N/A		
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00		N/A		
	5e.	Insurance	5e.	\$	255.00	\$	N/A		
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A		
	5g.	Union dues	5g.	\$	0.00	\$	N/A		
	5h.	Other deductions. Specify:	5h.+	\$	0.00	. + \$	<u> </u>		
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,081.00	\$	N/A		
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,333.00	\$	N/A		
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a.	\$	0.00	\$	N/A		
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		<b>c</b>	2.22	<b>c</b>	AV/A		
	8d.	settlement, and property settlement.  Unemployment compensation	8c. 8d.	\$	0.00		N/A N/A		
	8e.	Social Security	8e.	\$ 	0.00				
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f.	\$	0.00	\$	N/A		
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A		
	8h.	Other monthly income. Specify: sons contribution	8h.+	\$	400.00	+ \$	N/A		
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	400.00	\$	N/A		
10.	Cal	culate monthly income. Add line 7 + line 9.	10. \$	9	3,733.00 + \$		N/A = \$ 3,733.00		
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		3,700.00		
11.	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  1. State all other regular contributions to the expenses that you list in Schedule J.  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$  0.00								
12.		If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certallies					12. \$ <b>3,733.00</b>		
13.	Do	you expect an increase or decrease within the year after you file this form	1?				monthly income		
		No.							
		Yes. Explain:							

						_		
Fill in t	this informat	ion to identify yo	our case:			1		
Debtor	1	Angela M. B	urrow			Ched	ck if this is:	
						_	An amended filing	
Debtor (Spous	2 e, if filing)						A supplement shown 13 expenses as of	wing postpetition chapter
							10 expenses as or	the following date.
United	States Bankru	uptcy Court for the	: EASTE	RN DISTRICT OF TENNE	SSEE	-	MM / DD / YYYY	
Case no								
Offi	cial Fo	rm 106J						
		J: Your	Eyner	1888				12/15
Be as inform	complete a	ind accurate as	possible eded, atta	If two married people ar ch another sheet to this				or supplying correct
Part 1:	Descri	ibe Your House	ehold					
	_							
	No. Go to		in a canar	ate household?				
L			iii a sepai	ate nousenoid?				
	□ No		et file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ahold of Deb	tor 2	
		es. Debiol 2 mas	St file Offici	ari omi 1000-2, <i>Expenses</i>	Tor Separate House	eriola di Deb	101 2.	
2. <b>D</b>	o you have	dependents?	■ No					
	o not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
D	o not state	the						□ No
d	ependents r	names.						Yes
								□ No
								□ Yes □ No
								☐ Yes
								□ No
								☐ Yes
		enses include		No				
		people other t lyour depende		Yes				
expen	ate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
Includ	la avnansas	s naid for with	non-cash	government assistance i	f vou know			
the va	lue of such	assistance an		cluded it on Schedule I: \			v	
(Offici	ial Form 10	6I.)					Your exp	enses
4 T	'ho rontal o	r homo owners	hin ovnon	sos for your rosidonso	naluda firat martaga	•		
		d any rent for th		ses for your residence. I r lot.	nciude ilist mortgag	e 4. \$	S	889.00
If	not include	ed in line 4:						
4:	a. Real e	state taxes				4a. \$	5	0.00
		ty, homeowner's	s, or renter	's insurance		4b. \$		0.00
4	c. Home	maintenance, re	epair, and ι	ıpkeep expenses		4c. \$	S	0.00
		owner's associa				4d. \$		0.00
5. <b>A</b>	dditional m	nortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$	5	0.00

Debtor	Angela M. Burrow	Case num	ber (if known)	
6. <b>Ut</b>	ilities:			
6. <b>6</b> 1		6a.	\$	225.00
6b	•	6b.	·	95.00
6c		6c.		300.00
6d		6d.	\$	0.00
	ood and housekeeping supplies	7.	\$	385.00
	nildcare and children's education costs	8.	\$	0.00
_	othing, laundry, and dry cleaning	9.	\$	130.00
	ersonal care products and services	10.	\$	125.00
	edical and dental expenses	11.	· : ———	
	ansportation. Include gas, maintenance, bus or train fare.	11.	Φ	250.00
	o not include car payments.	12.	\$	450.00
	ntertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
	naritable contributions and religious donations	14.	·	0.00
	surance.	14.	Ψ	0.00
	o not include insurance deducted from your pay or included in lines 4 or 20.			
	a. Life insurance	15a.	\$	0.00
	b. Health insurance	15b.	· -	0.00
_	c. Vehicle insurance	15c.	·	143.00
	d. Other insurance. Specify:	15d.	·	0.00
	<b>IXES.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	Decify:	16.	\$	0.00
	stallment or lease payments:			
17	a. Car payments for Vehicle 1	17a.	·	0.00
	b. Car payments for Vehicle 2	17b.	\$	0.00
	c. Other. Specify:	17c.	\$	0.00
	d. Other. Specify:	17d.	\$	0.00
	our payments of alimony, maintenance, and support that you did not report a educted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I)		\$	0.00
	her payments you make to support others who do not live with you.	,	\$	0.00
	pecify:	19.		
). <b>O</b> t	her real property expenses not included in lines 4 or 5 of this form or on Sci	hedule I: Yo	ur Income.	
	a. Mortgages on other property	20a.		0.00
20	b. Real estate taxes	20b.	\$	0.00
20	c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	e. Homeowner's association or condominium dues	20e.	·	0.00
_	her: Specify:	21.	·	0.00
	' , <u> </u>		ΙΨ	0.00
	alculate your monthly expenses			
	a. Add lines 4 through 21.		\$	3,142.00
22	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	<u> </u>	\$	
22	c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,142.00
3. <b>C</b> a	alculate your monthly net income.			
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,733.00
	b. Copy your monthly expenses from line 22c above.	23b.	· -	3,142.00
_				
23	c. Subtract your monthly expenses from your monthly income.	220	(	591.00
	The result is your monthly net income.	23c.	\$	391.00
	o you expect an increase or decrease in your expenses within the year after or example, do you expect to finish paying for your car loan within the year or do you expect your car loan within the year or do you expect you			ase or decrease because of
_	dification to the terms of your mortgage?			
	No			
	Yes Explain here:			

## Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 44 of 52

Fill in this inform	nation to identify your	case:			
Debtor 1	Angela M. Burro	W			
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle Nome	Lost Name		
(Spouse if, filing)	FIRST Name	Middle Name	Last Name		
United States Ban	hkruptcy Court for the:	EASTERN DISTRICT OF	TENNESSEE		
Case number					
(if known)					Check if this is an
					amended filing
Official Form	106Dec				
		امييامانينامير	Dobtorio Co	hadulaa	
Declarati	on About a	an Individual	Deptor 8 30	nedules	12/15
,	U.S.C. §§ 152, 1341, Below	1513, and 5571.			
Did you pay	or agree to pay some	eone who is NOT an attorn	ey to help you fill out ba	ankruptcy forms?	
■ No					
□ Yes. N	ame of person			Attach Bankruntov Pa	tition Preparer's Notice.
☐ 1e3. No	anie or person				ature (Official Form 119)
	ty of perjury, I declare true and correct.	that I have read the sumn	nary and schedules filed	d with this declaration and	
X /s/ Ange	ela M. Burrow		X		
	M. Burrow		Signature of I	Debtor 2	
Signature	e of Debtor 1				
Date <b>D</b>	ecember 17, 2020		Date		

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$78	administrative fee	
+ \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 2:20-bk-51998-SDR Doc 1 Filed 12/17/20 Entered 12/17/20 16:38:10 Desc Main Document Page 49 of 52

## **United States Bankruptcy Court Eastern District of Tennessee**

In re	Angela M. Burrow			
		Debtor(s)	Chapter	13

### **VERIFICATION OF CREDITOR MATRIX**

The above Debtor(s) hereby verifies under the penalty of perjury under the laws of the United States of America that the attached list of creditors is true and correct to the best of his/her knowledge.

Date: December 17, 2020

/s/ Angela M. Burrow
Angela M. Burrow
Signature of Debtor

Date: December 17, 2020

/s/ Charles Parks Pope
Signature of Attorney
Charles Parks Pope 015617
The Pope Firm, P.C.

404 E Watauga Ave. PO BOX 6185 Johnson City, TN 37602 423-282-2512 Fax: 423-282-2703 Internal Revenue Service Centalized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346

Advance Financial 369 W Elk Ave Elizabethton, TN 37643

Ars Account Resolution 1643 Nw 136th Ave Sunrise, FL 33323

C&f Finance Company 1313 E Main Street Richmond, VA 23219

Enhanced Recovery Co L Po Box 57547 Jacksonville, FL 32241

Enhanced Recovery Co L Po Box 57547 Jacksonville, FL 32241

Inpt Conslt Of 1643 Nw 136th Ave Sunrise, FL 33323

Kaleb Whitehead 128 Dogtown Road Elizabethton, TN 37643

Law Offices Mba 3400 Texoma Parkway Sherman, TX 75092

Mendelson Law Firm PO Box 17235 Memphis, TN 38187

Northeast Community Credit Union 980 W E Street Elizabethton, TN 37643-2900

Tri Cities
Pob 715
Elizabethton, TN 37644

Tri Cities
Pob 715
Elizabethton, TN 37644

Verizon Wireless P.O. Box 4830 Trenton, NJ 08650

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950 Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield & Associates Po Box 50250 Knoxville, TN 37950

Wakefield and Associates PO Box 51272 Knoxville, TN 37950